

How Can We Fight the Prejudice and Discrimination of Psychiatric Labels?

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Raptly watching President Obama's inaugural address on January 21, I was struck by his acknowledgement – on equal terms – of three stunning civil rights milestones: Seneca Falls, Selma, and Stonewall. The Stonewall Inn, of course, is the gay bar where, in 1969, a police raid sparked several riots, which launched the modern gay rights movement. As if mentioning Stonewall—in the same breath as Seneca Falls and Selma!—were not enough, the President continued with an affirmation of LGBT (lesbian/gay/bisexual/transgender) rights.

Although I found the President's support of LGBT equality moving, I could not help feeling envious. The modern crusade for social justice by individuals with mental health diagnoses began at just about the same time. It was not catapulted into existence by a defining event like Stonewall; instead, it started with meetings in church basements of people helping each other heal from emotional trauma, and the creation of peer-run services (as described in Judi Chamberlin's seminal work, *On Our Own: Patient-Controlled Alternatives to the Mental*



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Health System). Yet, more than 40 years later, does the general public even know that our movement exists? More importantly, what about those among our natural allies and compatriots who would join us if they knew?

When I was locked up on the psych ward of a general hospital decades ago in New York City, my roommate received a visitor: Howie the Harp, one of the early organizers of our movement. It was

Howie who let me know that there WAS such a movement, and this very knowledge gave me hope.

I have been involved in this movement since 1984 and have seen massive gains during that time. These include the closing of state hospitals; legislation such as the Protection and Advocacy for Individuals with Mental Illness Act and the Americans with Disabilities Act; the Olmstead decision, which mandated community inclusion; and acknowledgment by the powers-that-be that most individuals with psychiatric diagnoses are trauma survivors <http://www.samhsa.gov/nctic/> and that peer support is a vital component of recovery (<http://store.samhsa.gov/shin/content/SMA05-4129/SMA05-4129.pdf>). In fact, the Substance Abuse and Mental Health Services Administration – the federal behavioral health authority – now accepts that individuals with psychiatric diagnoses DO recover and lead meaningful lives as contributing members of the community.

At the same time, we are still feared and objectified by many. So how do we create the same level of awareness of our movement that the LGBT movement has achieved?

In 2010, syndicated columnist Dan Savage created a campaign to inspire hope among young people who faced harassment because of their gender or sexual

identities. According to its website, "The It Gets Better Project™ has become a worldwide movement, inspiring more than 50,000 user-created videos viewed more than 50 million times." Indeed, President Obama contributed a video to the campaign.

Last year, David Oaks, founder of MindFreedom International, created the I Got Better (<http://igotbetter.org/>) campaign, with a similar goal: "to challenge the dominant narrative of hopelessness in mental health care by making stories of hope and mental wellness widely available through a variety of media." We should support this campaign and other media campaigns that spread messages of hope and recovery.

We also need to come together as a movement, despite our differences. A house divided against itself cannot stand, but the people united will never be defeated. These words have survived because they are true.

President Obama gave his 2013 inaugural address on the day we celebrated the birth of the Rev. Martin Luther King, Jr. In the Rev. King's galvanizing 1967 oration opposing the Vietnam War, he spoke of the "force urgency of now" and continued, "In this unfolding conundrum of life and history there is such a thing as being too late." Our movement needs to consider these words. If not now, when?

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